



PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

| Application Number | 09/900,591 | | | |
|------------------------|---------------------|--|--|--|
| Filing Date | July 5, 2001 | | | |
| First Named Inventor | Jiyunji Uchida | | | |
| Title | Schedule Management | | | |
| | System | | | |
| Group Art Unit | 2163 | | | |
| Examiner Name | | | | |
| Attorney Docket Number | 20911-06160 | | | |

| 1 | hereby ap | opoint: | | · · · · · · · · · · · · · · · · · · · | | | | | |
|--|---|---------------------------------------|----------------|---------------------------------------|------------------------|---------------------|---|--|--|
| [| P | ractitioners at Customer Number | 00758 | | $\Big] \to \Big\lceil$ | | | | |
| | P | ractitioner(s) named below: | | | L | | | | |
| | | Name | | Registration Number | | | | | |
| | Albe | ert C. Smith | | 20,355 | | | | | |
| | Edw | ard Van Gieson | | 44,386 | | | | | |
| | | <u> </u> | | | | | | | |
| | as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. | | | | | | | | |
| F | Please cha | ange the correspondence address f | or the above- | identified appl | ication to: | | | | |
| | ⊠ті | he above-mentioned Customer Nur | nber. | | | | | | |
| 1 | am the: | | | | | | | | |
| | X Appli | icant/Inventor OR Assign | ee of record o | of the entire in | terest. See | e 37 CFR 3.71. | | | |
| | | | | | | . (Form PTO/SB/96). | | | |
| | | | of Applicat | nt or Assigne | e of Recor | d | _ | | |
| _Name | | Jiyunji Uchida | | | | | — | | |
| Signatur | е | Jujung Uchida | | | _ | | | | |
| Date | | Soptember . 26. 2001 | | | | | | | |
| 1 | am the: | <u></u> | | | | | | | |
| | Applicant/Inventor OR Assignee of record of the entire interest. See 37 CFR 3.71. | | | | | | | | |
| Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record | | | | | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | - Oi Applicai | it of Assigne | e of Recor | u . | | | |
| Name | | Yoshinobu Hara | . <u></u> | | | | | | |
| Signatur | re | John 1 | | | | | | | |
| Date | | September 26 ; | 200/ | | | | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. | | | | | | | | | |
| ▼Total of two forms are submitted | | | | | | | | | |



PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT (supplemental sheet)

| Application Number | 09/900,591 | | |
|------------------------|-------------------|--|--|
| Filing Date | July 5, 2001 | | |
| First Named Inventor | Jiyunji Uchida | | |
| Title | SCHEDULE | | |
| riue | MANAGEMENT SYSTEM | | |
| Group Art Unit | 2163 | | |
| Examiner Name | | | |
| Attorney Docket Number | 20911-06160 | | |

| I hereby ap | point: | | | _ | | - | | |
|--|---|----------------|---------------------|-------------------|---|---|--|--|
| ☐ Pr | actitioners at Customer Number | 00758 | | $\Big] \to \Big $ | | | | |
| | | | | | C CERTIN COUNT COUNT ISSUED BY BY (1945, 400) | | | |
| ⊠ Pr | actitioner(s) named below: | | | | | | | |
| | Name | | Registration Number | | | | | |
| | rt C. Smith | | 20,355 | | | | | |
| Edwa | dward A. Van Gieson | | 44,386 | | | | | |
| | · | | | | | | | |
| | as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. | | | | | | | |
| Please cha | nge the correspondence address for | or the above-i | dentified appl | ication to: | | · | | |
| □ Th | ne above-mentioned Customer Nun | nber. | | | | | | |
| l am the: | | | | | | | | |
| K-7 | cant/Inventor OR Assigne | e of record o | f the entire in | toract Sa | e 37 CFR 3.71. | | | |
| [[] Applic | | | | | l. (Form PTO/SB/96). | | | |
| | | | t or Assigne | | | | | |
| Name | Shinya Itou | | | | | | | |
| Signature | Shinya Itou | | | | | | | |
| Date | Shinya / tou Sentember 26, 2001 | | | | | | | |
| I am the: | | | | | | | | |
| Applie | cant/Inventor OR Assigne | ee of record o | f the entire in | terest. Se | e 37 CFR 3.71. | | | |
| Applicant/Inventor OR Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | | | | | | |
| | SIGNATURE | of Applican | t or Assigne | e of Reco | rd | | | |
| Name | | | | | | | | |
| Signature | | | | | | | | |
| Date | | | | | | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. | | | | | | | | |
| ☐ *Total of two forms are submitted. | | | | | | | | |